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	APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	FIRST NAMED APPLICANT		ATTORNEY DOCKET NO.	
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					ART UNIT	PAPER NUMBER	
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		INTERV	EW SUMMARY	DATE	MAILED:		
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All pai	rticipants (applicant, applican	t's representative, PTO personnel):				
(1)	ERMA	CAMERON	(3)				
(2)	CHAIS TOPHEN	R BROWN	(4)				
Date	of Interview8/3	24/05					
		Il (copy is given to applicant	Manuficant's representative				
		A	•) .			
Exhibi	t shown or demonstration cor	nducted: Yes No If yes, t	orief description:	·	-		
Claim	ment was reached. v	all 1000 89/061	90				
Descri	option of the general nature of the applicant to the same to	t has propoetand of the same o	ent was reached, or any other dadding 7 mits the in work 106	relex	ents:limital endent	ins f dain in	
(A full must t attach	pe attached. Also, where no	and a copy of the amendments, if a copy of the amendments which we	available, which the examiner ould render the claims allowal	agreed ole is av	would render ailable, a sum	the claims allowable mary thereof must be	
1. 🔯	It is not necessary for applica	ant to provide a separate record of	f the substance of the intervie	w.			
IS NO action	T WAIVED AND MUST INCL	een checked to indicate to the cor LUDE THE SUBSTANCE OF THE PLICANT IS GIVEN ONE MONTH V.	INTERVIEW. (See MPEP Se	ction 71	3.04). If a res	ponse to the last Office	
	rejections and requirements:	ew summary above (including any that may be present in the last Off ponse requirements of the last Off	lice action, and since the clain	ns are n	ow allowable,	this completed form	

FORM **PTOL-413** (REV.1-98)

Examiner Note: You must sign this form unless it is an attachment to another form.